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## FACSIMILE TRANSMITTAL SHEET

DEPOSIT ACCOUNT BRANCH	FROM: Heidi M. Bryant						
COMPANY: USPTO	MONDAY, NOVEMBER 01, 2004						
FAX NUMBER: (703) 308-5077	TOTAL NO. OF PAGES INCLUDING COVER:						
PHONE NUMBER: (703) 305-4632	SENDER'S REFERENCE NUMBER:						
CHARGE DISPUTE	euference number: 09/783,577						

## NOTES/COMMEN'IS:

To Whom It May Concern:

We were charged \$110.00 for an extension fee on our September statement. The Decision on Petition stated that we had two months from the date of mailing of the Notice (6/30/04) to file an Appeal Brief. The Appeal Brief was mailed on 8/27/04 and the date received according to the PTO stamp on the postcard was 8/30/04. Accordingly, it would appear that we were charged in error for a one-month extension of time. Please credit our deposit account or advise us why these charges are valid.

Thank you for your assistance.

Heidi M. Bryant

**Billing Administrator** 

Ingrassia Fisher & Lorenz, P.C.

THIS MESSAGE IS INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY TO WILICH IT IS ADDRESSED, AND MAY CONTAIN INFORMATION THAT IS PRIVILEGED, CONFIDENTIAL AND EXEMPT FROM DISCLOSURE UNDER APPLICABLE LAWS. IP THE READER of this message is not the intended recipient, or the employee or agent responsible for delivering the MESSAGE TO THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION OR COPYING OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IP YOU HAVE RECE VED THIS COMMUNICATION IN ERROR, PLEASE NOTIFY US IMMEDIATELY BY TELEPHONE AND RETURN ORIGINAL MESSAGE TO US AT THE ABOVE ADDRESS VIA U.S. POSTAL SERVICE. THANK YOU.

Under the Deposition of the Country	nd to r	wacond h	U.S. Pai	ieni and	Approved for use through 07/31/2005, CM	COMMERCE
	_				Complete If Known	
FEE TRANSMITTA	ᆸ	Applic	allon N	umber	09/783,577	
£ 51/ 000 A	ı	Filing	Date		02/12/2001	
for FY 2004		First I	damed	Invento	victor I. Chornenky	
Effective 10101/2003. Persent lives are subject to annual revision.		Exam	iner Na	me	Shay, David M.	
Applicant claims small entity status, See 37 CFR 1.27		Art Ur	*		3739	
TOTAL AMOUNT OF PAYMENT (\$) 330.00		Attorn	ey Doc	ket No	009.1009C1 (P775CON2))	
METHOD OF PAYMENT (check all that apply)					CALCULATION (continued)	
Check Codit card Money Citer None  Deposit Account:  Deposit 50-2091  Hurber Deposit Ingrassia Fisher & Lorenz  Name The Olivetor is authorized to: (check of that apply)  Charge fac(a) indicated below Credit any overpayments  Charge say additional fee(b) or any underpayment of fee(a)  Charge fee(b) indicated below, except for the fitting fee to the above-identified disposit account.  FEE CALCULATION  1. BASIC FILING FEE	1051 1051 1053 1053 1053 1053 1804 1806 1251	10 (5) 1 130 2 50 3 130 2 2,520 4 920 5 1,840 1 110 2 420	Small E Pee F Code ( 2051 2052 1053 1812 2 1804 1605 1 2281 2252	608 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	Fee Description  uncharge - late filtry fee or outh  hurcharge - late filtry fee or outh  hurcharge - late provisional filtry fee or  over sheet  lon-English specification  or filtry a request for exparte resonantication  laquesting publication of SIR prior to  consister action  housesting publication of SIR after  examiner action  laterator action  Laterator for reply within first month  Extension for reply within second month	Fee Paid
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	e 1	BTOTAL (1) (\$)	1602	110	2402	<b>.</b>	,	
			1653	1,330	2453	665	Petition to sevice - unintentional	<u> </u>
2. EXTRA	CLAIM FEES	FOR UTILITY AND REISSUE	1501	1,330	2501	666	Utility leave fee (or relative)	_
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Independent Claims	.3**	• 🗀 × 🗀 -	1460	130	1460	130	Petitions to the Commissioner	
Mutiple Dopo	indent .		1807	50	1807	50	Processing les under 37 CFR 1.17(q)	lacksquare
Larme Entity	s Small Entity	<del></del>	1806	180	1806		Submission of Information Disclosure State	
Fee Fee Code (8)	Fee Fee Code (5)	Fee Description	8021	40	8021		Recording each patent easignment per property (times number of properties)	
1202 18	2202 9	Chime in excess of 20 Independent chime in excess of 3	1809	770	2809	385	Films a submission efter final rejection (37 CFR 1.129(a))	
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1204 86	2204 43	"Refusue independent claims over original patent	1801	770	2801	365	Request for Continued Examination (RCE)	
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent	1802	900	1802	900	Request for expedited examination of a design application	<u> </u>
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2403 145 Request for oral hearing

"or number previ	ously paid, if greater, For Reissues, see ab	340					
AUG.44777.50.04				(Complet	e (/ applicable)		
Name Print Type David K. Benson		Registration No.	Registration No. 42,314		Telephone .		
		T (April 1997)		Date	August 27, 2004		
Signature							

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USPTO by process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 misuses to complete,

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Adjustment date: 12/27/2004 SDIRETA2 09/30/2004 THARGROV 00000001 502091 09783577 01 FC:1251 110.00 CR

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Release filing fee

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